MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 214	Inconsistent M0360/M0380 values: If M0100 (Reason for Assessment) = 1 or 3 AND M0360 (Primary Caregiver) response is 1, 2, 3, 4, or 5 is checked, then at least one item in M0380 (Type) must be checked.	Cause: • When M0090 is prior to 12/16/2002 applies when (M0100) Reason for Assessment is 01, 03, 04, or 05. • When M0090 is 12/16/2002 or later applies to 01 or 03. • **IF** (M0360) Primary Caregiver response 1, 2, 3, 4, or 5 is checked, **THEN** at least **one** response from (M0380) Type of Primary Caregiver must be checked. Tip: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 215	Missing/Invalid Date: The required date for the identified item is either missing or contains an invalid date for the submitted record.	<u>Causes</u>:
		• Any record is rejected if a date item identified is missing or contains an *invalid* date.
		• RFA (M0100 - Reason for Assessment) determines the date items required for specific data records. **If required** on the record submitted, this message applies to the following date items:
		  ▪ (M0030) Start of Care Date
		  ▪ (M0032) Resumption of Care Date
		  ▪ (M0066) Birth Date
		  ▪ (M0090) Information Completion Date
		  ▪ (M0180) Inpatient Discharge Date
		  ▪ (M0903) Date of Last Home Visit
		  ▪ (M0906) Discharge/Transfer/Death Date
		<u>Definition</u>:
		• *Invalid* for the purposes of this message means that the date must contain a valid month, day, and year.
		<u>Tips</u>:
		• Check the "Field or OASIS Items" and the "Invalid Data Submitted" identified on the Final Validation Report to determine the date item that is missing or invalid.
		• The correct submission file format for all date fields is **"YYYYMMDD"**. The date submitted will display on the Final Validation Report the way it is in the submission file. If it is submitted in the file as "MMDDYYYY", it will be displayed this way on the Final Validation Report, indicating the reason for the message. This may mean your software vendor needs to be notified.
		• A partial birth date (year only or month and year only) would not cause a record to reject.
		• 0000 (zero, zero, zero, zero) in the YYYY (year, year, year, year) portion of the date field in not acceptable.
		<u>Examples</u>:
		• An *invalid* date would be June 32, 1999, (19990632).
		• A month of 40 or a day of 35 is not valid.
		<u>Action</u>:
		• Make appropriate corrections to the submitted record and resubmit.
		• Refer to the current data specifications to determine valid values.
		• Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips and Appendix B.
		Contact your software vendor for assistance.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 216	Invalid format: The submitted value for this field must contain numbers only. Letters and/or special characters such as a dash (-) are invalid.	<u>Cause</u>: • A non-numerical value was submitted for the identified field. A numerical value is the only acceptable value for this field. <u>Action</u>: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications. • Contact your software vendor for assistance. Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.
+ 217	Inconsistent M0350/M0360 values: If M0100 (RFA) = 1 or 3 AND M0350 (Assisting Person) response 4 or UK is checked, then M0360 (Caregiver) must be blank in accordance with the skip patterns for OASIS.	<u>Cause</u>: • Applies when (M0100) Reason for Assessment is 01 or 03. • **IF** (M0350) Assisting Person(s)... response 4 or "UK" is checked, **THEN** (M0360) Primary Caregiver responses must not be checked. <u>Definition</u>: • (M0350) Assisting Person(s) Other than Home Care Agency Staff <u>Tip</u>: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions</u>: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 218	Inconsistent M0350/M0360 values: If M0100 (Reason for Assessment) = 9 AND M0350 (Assisting Person) response is 4 or UK is checked, then M0360 (Caregiver) must be blank in accordance with the skip pattern for OASIS.	<u>Cause</u>: • When M0090 is prior to 12/16/2002 applies when (M0100) Reason for Assessment is 04, 05, or 09. • When M0090 is 12/16/2002 or later applies to M0100 (Reason for Assessment) 09. • **IF** (M0350) Assisting Person(s)... response 4 is checked, **THEN** the (M0360) Primary Caregiver responses must not be checked. <u>Definition</u>: • (M0350) Assisting Person(s) Other than Home Care Agency Staff <u>Tip</u>: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions</u>: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.
+ 219	Inconsistent M0350-M0380 values: If M0100 (RFA) = 1 or 3 AND M0350 (Assisting Person) response 4 or UK OR M0360 (Caregiver) response 0 (zero) or UK is checked, then M0370 thru M0380 must be blank.	<u>Cause</u>: • Applies when (M0100) Reason for Assessment is 01 or 03. • **IF** (M0350) Assisting Person(s)... response 4 or "UK" is checked OR (M0360) Primary Caregiver response 0 (zero) or "UK" is checked, **THEN** (M0370) Frequency of Primary Caregiver Assistance thru (M0380) Type of Primary Caregiver Assistance must not be checked. <u>Definition</u>: • (M0350) Assisting Person(s) Other than Home Care Agency Staff <u>Tip</u>: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions</u>: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 220	Inconsistent M0350-M0380 values: If M0100 (Reason for Assessment) = 9 AND M0350 (Assisting Person) item 4 is checked, then M0360 thru M0380 must be blank in accordance with the skip patterns for OASIS.	<u>Cause</u>: • When M0090 is prior to 12/16/2002 applies when (M0100) Reason for Assessment 04, 05, or 09. • When M0090 is 12/16/2002 or later applies when M0100 (Reason for Assessment is 09. • **IF** (M0350) Assisting Person(s)…response 4 or "UK" is checked, **THEN** (M0360) Primary Caregiver thru (M0380) Type of Primary Caregiver Assistance must not be checked. <u>Definition</u>: • (M0350) Assisting Person(s) Other than Home Care Agency Staff <u>Tip</u>: ☑ A checked response will display as a "1" on the validation report. ❏ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.
+ 221	Inconsistent M0200/M0210 values: If M0100 (Reason for Assessment = 1, 3 or 9 AND M0200 (Med. Regimen) item 0 (zero) is checked, then M0210 (Medical Diagnosis) must be blank in accordance with skip patterns.	<u>Cause</u>: • When M0090 is prior to 12/16/2002 applies when (M0100) Reason for Assessment is 01, 03, 04, 05, or 09. • When M0090 is 12/16/2002 or later applies when M0100 (Reason for Assessment) is 01, 03 or 09. • **IF** (M0200) Medical or Treatment Regimen Change Within Past 14 Days has a value of No, **THEN** (M0210)…Medical Diagnosis… must not be checked. <u>Definition</u>: • (M0210) List the patient's Medical Diagnoses and ICD code categories <u>for those conditions requiring changed medical or treatment regimen</u>. Tip: ☑ A checked response will display as a "1" on the validation report. ❏ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions</u>: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual, Chapter 8: Item-by-Item Tips.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 222	Inconsistent HHA Medicare number: The HHA Medicare number submitted in the header record does not match the (M0010) response in the body record.	<u>Cause</u>: • The HHA Medicare number in the *header record* of this submission file does not match the (M0010) Agency Medicare Provider Number in the body record. <u>Definition</u>: • *Header record:* The header record contains basic identifying information for the HHA, as well as, contact persons and telephone numbers to use in the event that the file is in error. It is the first line of data in the submission file. <u>Tips</u>: • The number must be left justified, contain no embedded dashes or spaces, and any letters must be upper cased. • With most encoding software, the HHA Medicare number is inserted in the header record by the software when a file is created. <u>Actions</u>: • Contact your software vendor for assistance with changing the header record data. Make appropriate corrections to the submitted record and resubmit.
+ 223	Inconsistent HHA Medicaid number: The HHA Medicaid number submitted in the header record does not match the (M0012) response in the body record.	<u>Cause</u>: • The HHA Medicaid number in the *header record* of this submission file does not match the (M0012) Agency Medicaid Provider Number in the body record. <u>Definition</u>: • *Header record:* The header record contains basic identifying information for the HHA, as well as, contact persons and telephone numbers to use in the event that the file is in error. It is the first line of data in the submission file. <u>Tips</u>: • The number must be left justified, contain no embedded dashes or spaces, and any letters must be upper cased. • With most encoding software, the HHA Medicaid number is inserted in the header record by the software when a file is created. <u>Actions</u>: • Contact your software vendor for assistance with changing the header record data. • Make appropriate corrections to the submitted record and resubmit.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 229	Inconsistent dates: The submitted effective date was less than the date in (M0066). The effective date cannot be earlier than the (M0066) date.	Cause: • Any record is rejected if the effective date is earlier than the (M0066) Birth Date. Definition: • RFA (M0100 - Reason for Assessment) determines the effective dates required for specific data records. **If required** on the data record submitted, this message applies to the following date items: ▪ (M0030) Start of Care Date for RFA 01 ▪ (M0032) Resumption of Care Date for RFA 03 ▪ (M0090) Information Completion Date for RFAs 04 & 05 ▪ (M0906) Discharge/Transfer/Death Date for RFAs 06, 07, 08, & 09 Tips: • Check the "Field or OASIS Items" and the "Invalid Data Submitted" identified on the Final Validation Report to determine the effective date that is less than the patient's birth date (M0066). • The correct submission file format for all dates is **"YYYYMMDD"**. The date submitted will display on the Final Validation Report the way it is in the submission file. If it is submitted in the file as *"MMDDYYYY"*, it will be displayed this way on the Final Validation Report, indicating the reason for the message. This may mean your software vendor needs notified. • Either the birth date and/or effective date may be incorrect. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Contact your software vendor for assistance.
+ 230	Inconsistent dates: The submitted effective date was less than 07/19/1999. The effective date cannot be earlier than 07/19/1999.	Causes: • The State System will not accept any assessment with an effective date prior to 07/19/1999 when encoding OASIS data was required. • RFA (M0100 - Reason for Assessment) determines the effective dates required for specific data records. **If required** on the data record submitted, this message applies to the following date items: ▪ (M0030) Start of Care Date for RFAs 01 ▪ (M0032) Resumption of Care Date for RFA 03 ▪ (M0090) Information Completion Date for RFAs 04 & 05 ▪ (M0906) Discharge/Transfer/Death Date for RFAs 06, 07, 08, & 09 Action: • No correction to this record is necessary.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 232	Date too old: This required date is more than 140 years in the past. This date cannot be more than 140 years earlier than the submission date.	Causes:
		• Any record is rejected if the date item identified is more than 140 years prior to the *current date*.
		• RFA (M0100 - Reason for Assessment) determines the date items required for specific data records. **If required** on the data record submitted, this message applies to the following date items:
		  ▪ (M0030) Start of Care Date
		  ▪ (M0032) Resumption of Care Date
		  ▪ (M0066) Birth Date
		  ▪ (M0090) Information Completion Date
		  ▪ (M0180) Inpatient Discharge Date
		  ▪ (M0903) Date of Last Home Visit
		  ▪ (M0906) Discharge/Transfer/Death Date
		Definition:
		• *Current date* refers to the date the file is submitted to the HCFA OASIS system at the state.
		Tips:
		• Check the "Field or OASIS Items" and the "Invalid Data Submitted" identified on the Final Validation Report to determine the effective date that is less than the patient's birth date.
		• The correct submission file format for all dates is **"YYYYMMDD"**. The date submitted will display on the Final Validation Report the way it is in the submission file. If it is submitted in the file as *"MMDDYYYY"*, it should be displayed this way on the Final Validation Report, indicating the reason for the message. This may mean your software vendor needs notified.
		• A partial birth date (year only or month and year only) would not cause a rejection.
		Actions:
		• Make appropriate corrections to the submitted record and resubmit.
		• Refer to the current data specifications to determine valid values.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 236	Inconsistent M0030/LOCK DATE dates: (M0030) Start of Care Date must be earlier or equal to the LOCK DATE.	Cause: • (M0030) Start of Care Date must be earlier than or the same as the LOCK DATE. Definition: • LOCK DATE is the date the assessment was locked in the HHA's encoding software. Tip: • LOCK DATE is an item that may not be visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file. • Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE. Actions: • Contact your software vendor to determine how your software handles the LOCK DATE. • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.
+ 237	Inconsistent M0030/M0032 dates: (M0030) Start of Care Date must be earlier than or equal to the (M0032) Resumption of Care Date.	Cause: • (M0030) Start of Care Date must be earlier than or the same as the (M0032) Resumption of Care Date. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.
+ 238	Inconsistent M0030/M0090 dates: (M0030) Start of Care Date must be earlier than or equal to the (M0090) Assessment Completion Date.	Cause: • (M0030) Start of Care Date must be earlier than or the same as the (M0090) Information Completion Date. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.
+ 239	Invalid M0060 value: (M0060) Patient Zip Code cannot be blank.	Cause: • (M0060) Patient Zip Code cannot be blank. • The required (M0060) Patient Zip Code is missing from the submitted record. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.
+ 241	Inconsistent M0180 values: If M0100 (RFA) = 1 or 3 AND M0180 (Inpatient Discharge Date) item UK is unchecked, then M0180 cannot be blank.	Cause: • **IF** (M0180) Inpatient Discharge Date response "UK" is not checked, **THEN** (M0180) Inpatient Discharge Date response cannot be left blank. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 242	Inconsistent MASK_VERSION_CODE value: If MASK_VERSION_CD is checked, then all required fields must be masked.	Cause:
		• **IF** MASK VERSION CODE has an acceptable value code of FIPS SHA-1, **THEN** the following fields must be masked:
		  ▪ (M0020) Patient ID Number
		  ▪ (M0040) Patient's First Name
		  ▪ (M0040) Patient's Last Name
		  ▪ (M0063) Medicare Number
		  ▪ (M0064) Social Security Number
		  ▪ (M0065) Medicaid Number
		• The data submitted in these fields appears to be unmasked.
		Definitions:
		• FIPS SHA-1 is the Federal Information Processing Standard publication about encryption. This standard specifies a Secure Hash Algorithm (SHA-1), which can be used to generate a condensed representation of a message called a message digest.
		• *Masking* is a process of "jumbling" the contents of the following fields to make it impossible to determine the identity of a patient in a submitted record:
		  ▪ (M0020) Patient ID Number
		  ▪ (M0040) Patient's First Name
		  ▪ (M0040) Patient's Last Name
		  ▪ (M0063) Medicare Number
		  ▪ (M0064) Social Security Number
		  ▪ (M0065) Medicaid Number
		Tips:
		• If this error occurs, the Rec_ID will be changed from B1 to P1.
		• Once this error has been received, no further edit checks are performed on this rejected record.
		• If (M0063) Medicare Number response "NA" is checked, then masking is not needed for (M0063). Submit blanks for (M0063). If "NA" is checked, then (M0063) should be left blank. Blanks should not be masked.
		• If (M0064) Social Security Number response "UK" is checked, then masking is not needed for (M0064). Submit blanks for (M0064). If "UK" is checked, then (M0064) should be left blank. Blanks should not be masked.
		• If (M0065) Medicaid Number response "NA" is checked, then masking is not needed for (M0065). Submit blanks for (M0065). If "NA" is checked, then (M0065) should be left blank. Blanks should not be masked.
		• *Masking* is required to protect the identity of a patient unless a Medicare and/or Medicaid response 1, 2, 3, and/or 4 is checked in (M0150).
		• The Final Validation Report does not display any identifying information.
		Actions:
		• Make appropriate corrections to the submitted record and resubmit.
		• Contact your software vendor to determine how your software handles the masking requirement.
		• Refer to the current data specifications.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 243	Inconsistent MASK_VERSION_CODE value: If MASK_VERSION_CD is unchecked, then no field in the record is to be masked.	Cause: • **IF** MASK VERSION CODE has a value of blank, **THEN** the following fields must not be masked: ▪ (M0020) Patient ID Number ▪ (M0040) Patient's First Name ▪ (M0040) Patient's Last Name ▪ (M0063) Medicare Number ▪ (M0064) Social Security Number ▪ (M0065) Medicaid Number • The data submitted in these fields appears to be masked. Definitions: • *Masking* is a process of "jumbling" the contents of the following fields to make it impossible to determine the identity of a patient in a submitted record: ▪ (M0020) Patient ID Number ▪ (M0040) Patient's First Name ▪ (M0040) Patient's Last Name ▪ (M0063) Medicare Number ▪ (M0064) Social Security Number ▪ (M0065) Medicaid Number Tip: • If this error occurs, the Rec_ID will be changed from B1 to N1. • Once this error has been received, no further edit checks are performed on this rejected record. • *Masking* is required to protect the identity of a patient unless a Medicare and/or Medicaid response 1, 2, 3, and/or 4 is checked in (M0150). • The Final Validation Report does not display any identifying information. Actions: • Make appropriate corrections to the submitted record and resubmit. • Contact your software vendor to determine how your software handles the masking requirement. • Refer to the current data specifications.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 244	Inconsistent M0150/MASK_VERSION_CODE values: If (M0150) Payment Sources items 1, 2, 3, or 4 are all unchecked, then MASK_VERSION_CD must be checked.	<u>Cause</u>:
		• Applies to all RFA's.
		• **IF all** (M0150) Current Payment Source response(s) 1, 2, 3, and 4 are unchecked, **THEN** MASK VERSION CODE must be checked.
		<u>Definitions</u>:
		• (M0150) Current Payment Source responses are:
		  ▪ Response 1 = Medicare (traditional fee-for-service)
		  ▪ Response 2 = Medicare (HMO/managed care)
		  ▪ Response 3 = Medicaid (traditional fee-for-service)
		  ▪ Response 4 = Medicaid (HMO/managed care)
		• *Masking* is a process of "jumbling" the contents of the following fields to make it impossible to determine the identity of a patient in a submitted record:
		  ▪ (M0020) Patient ID Number
		  ▪ (M0040) Patient's First Name
		  ▪ (M0040) Patient's Last Name
		  ▪ (M0063) Medicare Number
		  ▪ (M0064) Social Security Number
		  ▪ (M0065) Medicaid Number
		<u>Tip</u>:
		☑ A checked response will display as a "1" on the validation report.
		❑ A blank response (unchecked) will display as a "0" (zero) on the validation report.
		• Once this error has been received, no further edit checks are performed on this rejected record.
		• *Masking* is required to protect the identity of a patient unless a Medicare and/or Medicaid response 1, 2, 3, and/or 4 is checked in (M0150).
		• The Final Validation Report does not display any identifying information.
		<u>Actions</u>:
		• Make appropriate corrections to the submitted record and resubmit.
		• Contact your software vendor to determine how your software handles the masking requirement.
		• Refer to the current data specifications.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 245	Inconsistent M0150/MASK_VERSION_CODE values: If (M0150) Payment Sources items 1, 2, 3, or 4 are checked, then MASK_VERSION_CD must be unchecked.	<u>Cause</u>: • Applies to all RFA's. • **IF** (M0150) Current Payment Source response(s) 1, 2, 3, and/or 4 is/are checked, **THEN** MASK VERSION CODE must not be completed. <u>Definitions</u>: • (M0150) Current Payment Source responses are: ▪ Response 1 = Medicare (traditional fee-for-service) ▪ Response 2 = Medicare (HMO/managed care) ▪ Response 3 = Medicaid (traditional fee-for-service) ▪ Response 4 = Medicaid (HMO/managed care) • *Masking* is a process of "jumbling" the contents of the following fields to make it impossible to determine the identity of a patient in a submitted record: ▪ (M0020) Patient ID Number ▪ (M0040) Patient's First Name ▪ (M0040) Patient's Last Name ▪ (M0063) Medicare Number ▪ (M0064) Social Security Number ▪ (M0065) Medicaid Number <u>Tip</u>: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as a "0" (zero) on the validation report. • Once this error has been received, no further edit checks are performed on this rejected record. • *Masking* is required to protect the identity of a patient unless a Medicare and/or Medicaid response 1, 2, 3, and/or 4 is checked in (M0150). • The Final Validation Report does not display any identifying information. <u>Actions</u>: • Make appropriate corrections to the submitted record and resubmit. • Contact your software vendor to determine how your software handles the masking requirement. • Refer to the current data specifications.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 246	Inconsistent M0032/M0903/M0906/M0090/LOCK DATE dates: If response (M0032) is completed, then (M0032) date must be prior to or the same date as (M0090), (M0903), (M0906), and the Lock Date.	Cause: • **IF** (M0032) Resumption of Care Date response is completed, **THEN** (M0032) must be earlier than or the same as the following dates: ▪ (M0090) Information Completion Date ▪ (M0903) Date of the Last (Most Recent) Home Visit ▪ (M0906) Discharge/Transfer/Death Date ▪ LOCK DATE Definition: • LOCK DATE is the date the assessment was locked in the HHA's encoding software. • Tip: • LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file. • Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE. Actions: • Contact your software vendor to determine how your software handles the LOCK DATE. • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 247	Inconsistent M0100/Date values: If M0100 (RFA) = 1 AND M0180 (Inpatient Discharge Date) is completed, then M0180 must be prior to or the same as M0030 (Start of Care Date), M0090 (Completion Date), and LOCK DATE.	<u>Cause</u>:
		• **IF** (M0100) Reason for Assessment response 1 is checked **AND** (M0180) Inpatient Discharge Date is completed, **THEN** (M0180) date must be earlier than or the same as the following dates:
		  ▪ (M0030) Start of Care Date
		  ▪ (M0090) Information Completion Date
		  ▪ LOCK DATE
		<u>Definitions</u>:
		• LOCK DATE is the date the assessment was locked in the HHA's encoding software.
		• (M0100) Reason for Assessment response 1 is a Start of Care - further visits planned.
		<u>Tip</u>:
		• LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file.
		• Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE.
		<u>Actions</u>:
		• Contact your software vendor to determine how your software handles the LOCK DATE.
		• Make appropriate corrections to the submitted record and resubmit.
		• Refer to the current data specifications to determine valid date sequencing.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION

+ 248	Inconsistent M0100/Date values: If (M0100) response is 3 AND if (M0180) is completed, then (M0180) date must be prior to or the same date as (M0032), (M0090), and Lock Date.	Cause:
		• **IF** (M0100) Reason for Assessment response 3 is checked **AND** (M0180) Inpatient Discharge Date is completed, **THEN** (M0180) date must be earlier than or the same as the following dates:
		  ▪ (M0032) Resumption of Care Date
		  ▪ (M0090) Information Completion Date
		  ▪ LOCK DATE
		Definition:
		• LOCK DATE is the date the assessment was locked in the HHA's encoding software.
		• (M0100) Reason for Assessment response 3 is Resumption of Care after an Inpatient Stay.
		Tip:
		• LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file.
		• Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE.
		Actions:
		• Contact your software vendor to determine how your software handles the LOCK DATE.
		• Make appropriate corrections to the submitted record and resubmit.
		• Refer to the current data specifications to determine valid date sequencing.

+ 249	Inconsistent M0090/LOCK DATE: The submitted date in (M0090) is later than the Lock Date. If (M0090) date is completed, then the response must be a date earlier than or same as the Lock Date.	Cause: • **IF** (M0090) Information Completion Date response is completed, **THEN** (M0090) date must be earlier than or the same date as the LOCK DATE. Definition: • LOCK DATE is the date the assessment was locked in the HHA's encoding software. Tip: • LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file. • Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE. Actions: • Contact your software vendor to determine how your software handles the LOCK DATE. • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 250	Inconsistent M0903/LOCK DATE: The submitted date in (M0903) is later than the Lock Date. If (M0903) date is completed, then the response must be a date earlier than or same as the Lock Date.	Cause: • **IF** (M0903) Date of Last (Most Recent) Home Visit response is completed, **THEN** (M0903) date must be earlier than or the same date as the LOCK DATE. Definition: • LOCK DATE is the date the assessment was locked in the HHA's encoding software. Tip: • LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file. • Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE. Actions: • Contact your software vendor to determine how your software handles the LOCK DATE. • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.
+ 251	Inconsistent M0906/M0090/ LOCK DATE dates: (M0906) is later than (M0090) date or LOCK Date. If (M0906) date is completed, then it must be a date earlier than or the same as (M0090) date or the LOCK Date.	Cause: • **IF** (M0906) Discharge/Transfer/Death Date response is completed, **THEN** (M0906) date must be earlier than or the same date as the (M0090) Information Completion Date or the LOCK DATE. Definition: • LOCK DATE is the date the assessment was locked in the HHA's encoding software. Tip: • LOCK DATE is an item that may not visible to the HHA User. It may be an item that is filled in by the vendor software when the record is copied to a submission file. • Verify the date and time setting for the clock in the computer used to encode the OASIS data is set accurately. An inaccurate clock setting could cause submission of an improper LOCK DATE. Actions: • Contact your software vendor to determine how your software handles the LOCK DATE. • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid date sequencing.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 252	Inconsistent M0175/M0180/M0190 values: If (M0175) Inpatient Facilities item NA is checked, then (M0180) Inpatient Discharge Date and (M0190) Inpatient Diagnosis must be blank.	Cause: • **IF** (M0175) From which of the following… "NA" has been checked, **THEN** (M0180) Inpatient Discharge Date AND (M0190) Inpatient Diagnosis must be blank. Definition: • (M0175) From which of the following **Inpatient Facilities** was the patient discharged <u>during the past 14 days?</u> Tip: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.
+ 253	Inconsistent M0175/M0190 values: If M0100 (RFA) = 1 or 3 AND M0175 (Inpatient Facilities) 1, 2, 3, 4, or 5 is checked, then M0190 (Inpatient Diagnosis) cannot be blank.	Cause: • Applies to RFA's 01 and 03. • **IF** (M0175) From which of the following… has response 1, 2, 3, 4, or 5 checked, **THEN** (M0190) Inpatient Diagnosis cannot be blank. Definition: • (M0175) From which of the following **Inpatient Facilities** was the patient discharged <u>during the past 14 days?</u> Tip: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 254	Inconsistent M0175/M0200/M0220 values: Data in (M0220) is not consistent with the dates in (M0200) or (M0175). (M0220) "NA" must be checked if (M0175) "None" AND (M0200) "No" are checked.	Cause: • **IF** (M0175) From which of the following… Response 1, 2, 3, 4, or 5 OR (M0200) Medical or Treatment Regimen Change Within Past 14 Days "No" are checked, **THEN** (M0220) Conditions Prior to… "NA" must not be checked. Definition: • (M0175) From which of the following **Inpatient Facilities** was the patient discharged during the past 14 days? • (M0220) Conditions Prior to Medical or Treatment Regimen Change or Inpatient Stay Within Past 14 Days. Tip: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.
+ 255	Inconsistent M0175/M0200/M0220 values: If M0100 (Reason for Assessment) = 1 or 3 AND M0175 (Inpatient Facilities) "NA" is checked AND M0200 (Regimen) "No" is checked then M0220 (Conditions Prior) "NA" must be checked.	Cause: • When M0090 is prior to 12/16/2002 applies when (M0100) RFA is 01, 03, 04, or 05. • When M0090 is 12/16/2002 or later applies when M0100 (RFA) is 01 or 03. • **IF** (M0175) From which of the following… "NA" is checked AND (M0200) Medical or Treatment Regimen Change Within Past 14 Days "No" is checked, **THEN** (M0220) Conditions Prior to NA must be checked. Definition: • (M0175) From which of the following **Inpatient Facilities** was the patient discharged during the past 14 days? • (M0220) Conditions Prior to Medical or Treatment Regimen Change or Inpatient Stay Within Past 14 Days. Tip: ☑ A checked response will display as a "1" on the validation report. ❑ A blank response (unchecked) will display as "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.
+ 256	Inconsistent HIPPS_CODE/HIPPS_VERSION: If HIPPS_CODE is completed, then HIPPS_VERSION cannot be blank	Cause: • **IF** the HIPPS_CODE contains a valid code, **THEN** the HIPPS_VERSION cannot be blank and MUST contain a valid code. Definitions: • HIPPS_CODE is the HIPPS Grouper Code. • HIPPS_VERSION must be equal to "01.30 or 01.04" for this release. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 258	Inconsistent M0100/M0825/HIPPS_CODE: If M0100 (RFA) = 1, 3, 4 or 5 AND M0825 (Therapy Need) is "Yes" or "No", then HIPPS_CODE cannot be blank.	Cause: • **IF** the (M0100) Reason for Assessment type is 01, 03, 04, or 05 AND (M0825) High Therapy Need is checked "Yes" or "No", **THEN** the HIPPS_CODE cannot be blank. Definition: • HIPPS_CODE is the HIPPS Group Code. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.
+ 259	Inconsistent M0100/M0825/HIPPS_CODE: If M0100 (RFA) = 1, 3, 4 or 5 AND M0825 (Therapy Need) item "NA" is checked, then HIPPS_CODE must be blank.	Cause: • **IF** the (M0100) Reason for Assessment type is 01, 03, 04, or 05 AND (M0825) High Therapy Need is checked "NA", **THEN** the HIPPS_CODE must be blank. Definition: • HIPPS_CODE is the HIPPS Group Code. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine the valid values. • Contact your software vendor for assistance.
+ 260	Missing/Invalid Date: The (M0090) date is either missing or contains an invalid date for the submitted record.	Cause: • Any record is rejected if the (M0090) Information Completion Date is missing or contains an <u>invalid</u> date. Definition: • <u>Invalid</u> for the purposes of this message means that the date must contain a valid month, day, and year. Tips: • Check the "Field" and the "Invalid Data" identified on the Final Validation Report to determine the date item that is missing or invalid. • The correct submission file format for all date fields is **"YYYYMMDD".** The date submitted will display on the Final Validation Report the way it is in the submission file. If it is submitted in the file as "MMDDYYYY"; it will be displayed this way on the Final Validation Report and indicating the reason for the message. This may mean your software vendor needs to be notified. • 0000 (zero, zero, zero, zero) in the YYYY (year, year, year, year) portion of the date field is not acceptable. Examples: • An *invalid* date would be June 32, 1999. • A month of 40 or a day of 35 is not valid. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values. • Refer to the OASIS Implementation Manual Chapter 8: Item-by-Item Tips and Appendix B. • Contact your software vendor for assistance.

Table 1-4. Fatal Record

MESSAGE NUMBER	MESSAGE	MESSAGE DESCRIPTION
+ 261	Inconsistent Version Number: This field must contain the version number for the data specifications used for submission. The current allowable version numbers are 1.10, 1.20, and 1.30.	Cause: • **IF** the Version Number field contains anything other than 01.10, 01.20, or 01.30 **THEN** the record is rejected. Action: • Make appropriate corrections to the submitted record and resubmit. • Contact your software vendor for assistance.
+ 263	Inconsistent HIPPS_CODE/HIPPS_VERSION: If HIPPS_CODE is blank, then HIPPS_VERSION must be blank.	Cause: • **IF** the HIPPS_CODE field is blank, **THEN** the HIPPS_VERSION field must be blank. Definition: • HIPPS_CODE is the HIPPS Grouper Code. • HIPPS_VERSION must be equal to "01.00" for this release. Action: • Make appropriate corrections to the submitted record and resubmit. • Contact your software vendor for assistance.
+ 266	Inconsistent M0066/M0090 dates: The required (M0066) Birth Date is less than 18 years in the past. The (M0066) Birth Date cannot be less than 18 years from the (M0090) date.	Cause: • **IF** the (M0066) Patient's Birth Date is less than 18 years from the (M0090) Information Completion Date, **THEN** the record is rejected. Tip: If this error occurs the Rec_ID will be changed from B1 to D1. Action: • If the patient's Birth Date is correct, no further action is necessary.
+267	Invalid Info_Completed_Dt (M0090): Unable to process record due to this date being outside acceptable date ranges. Info_Completed_Dt cannot precede 07/19/1999 and cannot be later than the current date.	Cause: • If the M0090 date is earlier than 07/19/1999 the record will be rejected. Action: • Verify M0090 date was entered correctly and resubmit the record.

Table 1-4. Fatal Record

Message number	Message	Message Description
+269	Inconsistent M0440/M0445 values: If M0440 is checked yes then M0445 cannot be blank.	Cause: • (M0445) Does the patient have a Pressure Ulcer must not be blank if (M0440) Does the patient have a Skin Lesion or Open Wound is marked "yes" • When M0090 is prior to 12/16/2002 applies to M0100 (RFA) 01, 03, 04, 05, and 09. • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 01, 03, and 09. Actions • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.
+270	Inconsistent M0440/M0468 values: If M0440 is checked yes then M0468 cannot be blank.	Cause: • (M0468) Does the patient have a Stasis Ulcer must not be blank if (M0440) Does the patient have a Skin Lesion or Open Wound is response "1" is checked. • When M0090 is prior to 12/16/2002 applies to M0100 (RFA) 01, 03, 04, 05, and 09 • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 01, 03, and 09. Tip: ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.
+271	Inconsistent M0468/M0470-M0476: values: If M0468 is checked yes, then M0470 thru M0476 cannot be blank.	Cause: • If (M0468) response 1 is checked, then M0470 thru M0476 cannot be blank (unchecked). • When M0090 is prior to 12/16/2002 applies to M0100 (RFA) 01, 03, 04, 05, and 09. • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 01, 03 and 09. Definition • (M0468) Does the patient have a Stasis Ulcer? • (M0470) Current number of Observable Stasis Ulcers. • (M0474) Does the patient have at least one Stasis Ulcer that Cannot be Observed due to the presence of a nonremovable dressing? • (M0476) Status of Most Problematic Stasis Ulcer: Tip: ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to

Table 1-4. Fatal Record

Message number	Message	Message Description
+272	Inconsistent M0440/M0482 values: If M0440 is checked yes, then M0482 cannot be blank.	Cause: • When M0090 is prior to 12/16/2002, applies to M0100 (RFA) 01, 02, 03, 04, 05, or 09. • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 01, 03, or 09. • If (M0440) is checked "yes" then M0482 must not be blank. Definition: • (M0440) Does the patient have an Open Wound or Skin Lesion? • (M0482) Does the patient have a Surgical Wound? Tip: ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.
+273	Inconsistent M0482-M0488 values: If M0482 is checked yes, then M0484 thru M0488 cannot be blank.	Cause: • When M0090 is prior to 12/16/02 applies to M0100 (RFA) 01, 03, 04, 05, or 09. • When M0090 is 12/16/02 or later applies to M0100 (RFA) 01, 03, or 09. • If M0482 is checked "yes" then M0484-M0488 must not be blank. Definition: • (M0482) Does the patient have a Surgical Wound? • (M0484) Current Number of (Observable) Surgical Wound: • (M0486) Does the patient have at least one Surgical Wound the Cannot be Observed due to the presence of a nonremovable dressing? • (M0488) Status of Most Problematic (Observable) Surgical Wound: Tip: ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. Actions: • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.

Table 1-4. Fatal Record

Message number	Message	Message Description
+274	Inconsistent M0100/M0220 values: If M0100 (Reason for Assessment) = 1 or 3 at least one item from M0220 (Conditions Prior) must be checked. Also, all items in M0220 that are unchecked must be submitted as 0 (zero).	<u>Cause:</u> • If M0090 is prior to 12/16/2002 AND M0100 is 01, 03, 04, or 05 then something in (M0220) 1-7 must be checked. • If M0090 is 12/16/2002 or later AND M0100 is 01 or 03 then something in (M0220) 1-7 must be checked. <u>Definition:</u> • (M0100) Reason for Assessment 01 is a Start of Care – further visits planned. • (M0100) Reason for Assessment 02 is Start of Care – no further visits planned. • (M0100) Reason for Assessment 03 is Resumption of Care. • (M0100) Reason for Assessment 04 is Recertification (follow-up) reassessment. • (M0100) Reason for Assessment 05 is Other follow-up. <u>Tips:</u> ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions:</u> • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.
+275	Inconsistent M0520/M0530 values: If M0520 is checked yes, then M0530 cannot be blank.	<u>Cause:</u> • When M0090 is prior to 12/16/2002 applies to M0100 (RFA) 01, 03, 04, 05, or 09. • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 01, 03, or 09. • If (M0520) response 1 is checked, then (M0530) must not be blank. <u>Definition:</u> • (M0520) is Urinary Incontinence or Urinary Catheter Presence. • (M0530) is When does Urinary Incontinence occur? <u>Tips:</u> ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions:</u> • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.

Table 1-4. Fatal Record

Message number	Message	Message Description
+276	Inconsistent M0100/M0830/M0840 values: If M0100 (Reason for Assessment) = 6, 7 or 9 AND M0830 (Emergent Care) 1, 2 or 3 is checked, at least one M0840 (Emergent Care Reason) must be checked. Unchecked M0840 items must be submitted as 0 (zero).	<u>Cause:</u> • When M0090 is prior to 12/16/2002 applies to M0100 (RFA) 04, 05, 06, 07, or 09 and (M0830) response 1, 2, or 3 is checked then M0840 must not be blank. • When M0090 is 12/16/2002 or later applies to M0100 (RFA) 06, 07, or 09. <u>Definition:</u> • (M0100) Reason for Assessment 04 is Recertification (follow-up) reassessment. • (M0100) Reason for Assessment 05 is Other follow-up. • (M0100) Reason for Assessment 06 is Transferred to an inpatient facility – patient not discharged from agency. • (M0100) Reason for Assessment 07 is Transferred to an inpatient facility – patient discharged from agency. • (M0100) Reason for Assessment 09 is Discharge from agency. • (M0830) is Emergent Care: Since the last time OASIS data was collected, has the patient utilized any of the following services for emergent care (other than home care agency services)? • (M0840) is Emergent Care Reason: For what reason(s) did the patient/family seek emergent care? <u>Tips:</u> ☑ A checked response will display as a "1" on the validation report. ☐ A blank response (unchecked) will display as a "0" (zero) on the validation report. <u>Actions:</u> • Make appropriate corrections to the submitted record and resubmit. • Refer to the current data specifications to determine valid values.

Table 1-4. Fatal Record